573294318US Express Mall Label No.

(09-04)
Approved No. 10 (Brough 11/30/2005, CNHB (6551-0435)
U.S., Felicin and Tre-deficient Cology U.S., DEPARTMENT OF COMMERCE
to a collection of Information unloss, it displays a valid CNHB continuous.

Under the Paperwork Reduction Act of 1985, no popular are re-	quired to respond to a collection of Info	metion unions it displays a volid OMB control number.
Unider the Paperwork Reduction Als of 1305, 10 Per	Application Number	
POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Filing Date	18 December 2003
	First Named Inventor	BRUNNER, Karlheinz
	Titlo	METHOD & DEVICE FOR OBTAINING FATTY ACID
	Art Unit	
	Examinor Name	
	Attorney Docket Number	460868,00020

<u> </u>						1 40	TOOO'DOO'S				
/ hero	by appoint				,						
Z	Practitioners associated with the Customer Number:		26710								
	OR										
	Practitioner(s) n	emed be	law:								
			Name			Registr	ation Number				
						<u> </u>				 	
	L										
											٠
						<u> </u>					
as ma	pour attorney(s) o mark Office cont	or egent(s) to prosecute the application enswith.	identified ab	ove, and to t	ransact all busi	U ent) ni easoni	nited S	inles Pal	ent and	
Pleas	ic recognize or ch	sange the	corrospondence address for	the above-ide	euglied spo	cation to:					
	The address	astocial	benother evode out him be	Justomer Nu	mber:						
ľ	OR						7				
	The address	a3304isi	ted with Customer Number:								
4	First or Individual Name	2	Daniel G. Radler, QUA	ARLES & E	BRADY LL	P .					
	Address		411 E. Wisconsin Ave	nue							
	City		Milwaukee		State	WI		Zip	53202	_	
\vdash	Country		บร								
	Tetaphone		414-277-5000		Fax	414-271-3	551				
	Applicant/Inve	ecord of	the entire Interest. See 37 CFF FR 3,73(b) (s enclosed. (Font	₹ 3,71. PTO/S8/96)							
			SIGNATURE OF	Applicant o	r Azsignon	of Recard					
Sign	ittro		1/4 1/4	FULL	wes		Date	15	.04	20	12
Narp	3		Kartheint	Brun	иег		Telephone	┢╌┵			
Title	and Company										
NOTE:	THE SERVICES OF HIS CO.	ie invenio below,	त्त कर ब्ह्यांक्षतबन्द्र को छटवाचे वो पात बार्य	lite intermed of	their reprocent	tilve(a) and tedri	ited. Submil mu	Note for	na if more	than one	•
1		1	forms are submitted								

This conscion of investion is required by 37 CPR 1.31 and 1.33. The inflametion is required to obtain or rousin a benefit by the public which is to the (and by the LUSPTO to precess) on application. Conditionably is governed by 35 U.S.C. 122 and 37 CPR 1.11 and 1.14. This collection is embracing to take 3 minutes to complete, including generale, expensive, and submitting the completed opplication form to the USPTO. Time was vary depending upon me instituted case, any comments on the amount of time year results to complete this form end/or expensions for reducing this burden, should be count to the Chief Information Officer, U.S. Department of Commence, P.O. Box 1450, Abstanced, VA 22313-1450. DO NOT SEND FIESS OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioners for Patents, P.O. Box 1450, Algorization, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-0199 and select option 2.

Doc, No. [footer]

Express Mail Label No.

C



(09-04)
Approved for 434 through 11/30/2005, OMB 0851-0835
U.S. Patent and Teadomer's Other, U.S. DEPARTMENT OF COMMERCE
As a subsection of information and any 1 Mills. Under the Paper-loft Reduction Act of 1995, no parmona are requir

POWER OF ATTORNEY
алф
orrespondence address
INDICATION FORM

	miglion unique il displaye e welld OMS control number.
Application Number	
Filing Date	18 December 2003
First Named Invantor	BRUNNER, Kertheinz
Titia	HETHDO & DEMOT FOR OUTAINING FATTY ACID
Art Unit	
Examinar Maina	
Ademay Deskat Number .	460868.00020

I nereby appoint							
Practitioners ass Number:	Preditioners associated with the Customer Number:			26710			
Ø ₽							
Practitioner(s) ramed below:							
	Name Registration Number					'	
 		- 					
 							
						 -	
na myourniomey(s) or Trademark Office carrie	r egent(s) to prosecute the application	evode belignabl	ot bne .	rensect all busid	less in the U	inited States Patent and	
Pianse reconnize or cha	ange the convespondance address for	the above-lident	fort not	icilian tar			
	associated with the goods-mendioned C			Carrent to.			
O R			<u> </u>		_		
<u> </u>		Ī			Ì	•	
The address associated with Customer Number:							
Firm of Individual Name							
Address 411 É. Wisconsin Avenue							
City	Milweukee		State	WI		Zp 53202	
Cofulty	US			<u></u>		1 00222	
Telephone	414-277-5000		Fpx	414-271-35	51		
i am the:							
Applicantaves	Mer.						
Autignoe of re	cond of the entire Induest. See 37 CFR for 37 CFR 3.73(b) is enclosed. (Form	23.71. PTO/SB/96)					
SIGNATURE of Applicant or Applicant of Record							
Skineturo	1800/25	(a)		-	Dale	15/04/05	
Name				<u> </u>	Telephone	70470	
Title and Company T+T Oleochelanie, General Manager							
NOTE: Signatures वा की live inventors के desciptors of tocord of the Little interest of their representative(e) are marked. Swertl सामीकृत forms if more than one signature is required, see below.							
Total of 1	forms are submined.						

This collection of information to required by 37 CFR 1.31 and 1.32. The information is required to adults or regular a benefit by the pythic which is to the (and by the USPTO to process) an application. Confidentially is governed by 33 U.S.C. 122 and 37 CFR 1.41 and 1.12. This collection is emission to test 3 mirrors in complete, including purposing, preparing, and submitting the complete application forms the USPTO. Time will vary depending even the traditional case. Any complete on the incomplete of the complete of the complete of requiring this burston, about to the Crist information Called, U.S. Petern and Testomark Office, U.S. Department of Contractor, P.O. Boy 1850, Alexandria, VA 22313-1450, DO NOT SEND FREED OR COMPLETED HORREST THIS ADDRESS. SEND TO: Commitgetoner for Patones, P.O. Boy 1460, Alexandria, VA 22313-1460.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Doc. No. [footer]